

**Fire
aRson**



**Investigation
Starter
Kit
F.R.I.S.K.**



**Fire
aRson**



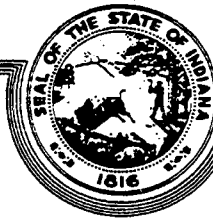
**Investigation
Starter
Kit**

F.R.I.S.K.



STATE OF INDIANA

An Equal Opportunity Employer
A Non-Tax Supported State Agency



EVAN BAYH
GOVERNOR

INDIANA DEPARTMENT OF FIRE AND BUILDING SERVICES

OFFICE OF THE STATE FIRE MARSHAL
402 W. Washington Street, Room E241
Indianapolis, Indiana 46204-2739
(317) 232-2222

Hello,

First, I would like to thank you for your desire to work with our office. If at anytime you have a questions, comments, or concerns about the office, please feel free to contact me.

Chief Investigator Bob Dean and his Investigators have put their heads together and developed a fantastic new program that will assist you, the fire department investigator, and the State Fire Marshal Investigator for your area! This program will have several benefits that will hopefully produce some incredible results for everyone!

FRISK, Fire/aRson Investigation Starter Kit, is a kit in packet form to allow you to get started on the investigation while my Investigators are enroute. One of the big benefits is time. By you using the kit and getting the required information, it will mean that our Investigator will be spending less time asking repeated questions or doing repeated tasks. This means that you and the Investigator can devote more time to the investigation! Filling out all the forms ensures you obtain all the important facts and pieces of evidence, thus, conducting a thorough investigation. There are forms included so that evidence can be transferred properly. We don't want evidence lost in trials because we couldn't show it's chain of custody.

We suggest that you run copies of the forms and keep the packet as an original in a safe place. The Kit contains the following forms:

REQUESTING AN INVESTIGATOR- This flyer assists you in your request for your area Investigator.

CONSENT FORM- This form should signed. It is suggested that even if you stay on the scene, you have the owner/occupant sign the consent form.

REPORT OF FIRE INVESTIGATION- This report contains five pages. All the fields on the five pages should be filled out if the information is available. Especially, page one thru three. Page four is an explanation page that you can make notes about your fire investigation observations. Page five should be completed if an arrest is made prior to our Investigator's arrival. Remember, getting most of the information here can help increase the time available for other areas of the investigation.

EVIDENCE PACKAGING/SEALING- This flyer is designed as a guideline for properly preparing evidence that is taken. Also attached in this section is the **COLLECTION OF VOLATILE FLAMMABLES** flyer from the Indiana State Police. Please read both very carefully. It could make a difference on whether or not you get your evidence analyzed.

PROPERTY RECORD AND RECEIPT- This form should be completed if you are going to have your evidence analyzed. Remember, showing chain of custody could make a difference when it comes to introducing evidence in a trial!

REPORT OF VEHICLE FIRE INVESTIGATION- This report is two pages. Use this report if you are conducting a vehicle fire investigation. Again, remember that by getting most of the information here can help increase the time available for other areas of the investigation.

OWNER/OCCUPANT FIRE INVESTIGATION QUESTIONNAIRE - This four page form can be given to the owner/occupant to fill out or you can ask them the questions and write their answers in the blanks. The concept is that you are "locking" the individual into a statement. This can be very helpful later in investigation to help to determine whether or not they have been truthful.

FIREMAN/POLICE OFFICER OBSERVATION REPORT - This form should be given to the first firefighter or police officer on the scene. Make sure they complete both sides of the form. It is also suggested that the first interior attack crew complete one also.

As an incentive to help you in collecting evidence, our Investigators will give you cans in exchange for what you have taken. The maximum number they can give you is five. There is a condition to this. First, your department has to buy sealed unlined metal cans. Your paperwork has to be complete and filled out properly! We will only give you back as many cans as you used. For example, if you took two samples and filled out the proper paperwork, our Investigators will give you two cans back. If you take ten samples, you will only get five new cans. If you have problems finding these types of cans, contact Chief Investigator Bob Dean at 317/232-2443. He will give you some ideas on where to get them.

Our Investigators will be watching the effectiveness of this program! If you have any comments, please call or write Chief Bob Dean.

I am very excited about this program! I think it will help our cooperation with your department in fire investigations. Good luck and I wish you success with FRISK!

Tracy Boatwright



REQUESTING AN INVESTIGATOR



1. Completely extinguish the fire.
2. Secure your scene.
3. Conduct your preliminary scene investigation. Locate owner/occupant, witnesses, or involved parties.
4. Secure the owner/occupant's signature on right to enter and search form (Consent form).
5. Notify either of the following to request an investigator
 - a. Indiana State Fire Marshal's Office...800/423-0765
or 317/232-2445

AFTER WORKING HOURS

- b. Emergency Operations Center...800/669-7362
 - c. ISP Operations...317/232-8350
6. On Call supervisor will make contact with you concerning your request.
7. Assigned investigator will make contact with you.

FRISK PROGRAM

CASE # _____

INDIANA STATE FIRE MARSHAL'S OFFICE
CONSENT FORM FOR FIRE SCENE EXAMINATION

I, _____ HAVE BEEN REQUESTED TO CONSENT
TO AN EXAMINATION OF MY PROPERTY LOCATED AT: _____

(FULL DESCRIPTION AND ADDRESS OF PROPERTY)

THIS EXAMINATION IS BEING CONDUCTED AS PART OF AN INVESTIGATION OF THE
WHICH OCCURRED TO THIS PROPERTY ON _____

(DATE OF FIRE)

I AM THE LAWFUL OCCUPANT OF THIS PROPERTY. I HAVE BEEN ADVISED OF MY CONSTITUTIONAL RIGHTS TO REFUSE SUCH CONSENT AND TO REQUIRE A SEARCH WARRANT BE OBTAINED PRIOR TO ANY EXAMINATION. I HAVE FURTHER BEEN ADVISED THAT I DO CONSENT TO AN EXAMINATION, ANY EVIDENCE FOUND AS A RESULT OF SUCH EXAMINATION CAN BE SEIZED AND USED AGAINST ME IN ANY COURT OF LAW, AND THAT I MAY WITHDRAW MY CONSENT AT ANY TIME PRIOR TO THE CONCLUSION OF THE EXAMINATION.

AFTER HAVING BEEN ADVISED OF MY CONSTITUTIONAL RIGHTS AS STATED ABOVE, I HEREBY VOLUNTARILY WAIVE THOSE RIGHTS AND CONSENT TO AN EXAMINATION AND AUTHORIZE THE INDIANA STATE FIRE MARSHAL'S OFFICE, INDIANA STATE POLICE AND THE _____ FIRE DEPARTMENT, OR THEIR REPRESENTATIVE TO CONDUCT A COMPLETE EXAMINATION OF THE ABOVE-DESCRIBED PROPERTY. FURTHER, PERMISSION IS GRANTED TO REMOVE FROM THIS PROPERTY ANY MATERIAL DEEMED PERTINENT IN RELATION TO THE INVESTIGATION OF THIS FIRE.

(SIGNED) _____ /
(DATE)

WITNESSES:

DATE _____ TIME _____

FRISK PROGRAM

FIRE DEPARTMENT
INVESTIGATION DIVISION

Page 1 of 5

REPORT OF FIRE INVESTIGATION

CASE NUMBER: _____ DATE ASSIGNED: _____ INVESTIGATOR: _____
DATE INVESTIGATION BEGAN: _____OWNER'S NAME: _____
OWNER'S ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE: _____
INSURANCE CO.: _____
AGENT: _____ PHONE: _____ POLICY #: _____
ADJUSTER: _____ PHONE: _____ CLAIM #: _____
BUILDING COVERAGE: _____ CONTENTS COVERAGE: _____
MORTGAGE CO.: _____ MONTHLY PAYMENTS: _____ CURRENT?: _____OCCUPANT'S NAME: _____
OCCUPANT'S ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE: _____
INSURANCE CO.: _____
AGENT: _____ PHONE: _____ POLICY #: _____
ADJUSTER: _____ PHONE: _____ CLAIM #: _____
BUILDING COVERAGE: _____ CONTENTS COVERAGE: _____
MORTGAGE CO.: _____ MONTHLY PAYMENTS: _____ CURRENT?: _____DOING BUSINESS AS: _____
ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE: _____
INSURANCE CO.: _____
AGENT: _____ PHONE: _____ POLICY #: _____
ADJUSTER: _____ PHONE: _____ CLAIM #: _____
BUILDING COVERAGE: _____ CONTENTS COVERAGE: _____
BUSINESS INTERRUPTION: _____
MORTGAGE CO.: _____ MONTHLY PAYMENTS: _____ CURRENT?: _____

DATE OF FIRE: _____ DAY: _____ TIME: _____ hrs FD ARRIVAL TIME: _____ hrs

DID FD RESPOND?: _____ NAME: _____

O.I.C.: _____ PHONE: _____

HOW LONG WAS FD ON THE SCENE BEFORE 90% OF FIRE WAS EXTINGUISHED?: _____

FIRST FF/PO ON SCENE: _____ DEPT.: _____

FIRST FF IN ON INTERIOR ATTACK: _____ DEPT.: _____

REQUEST MADE BY: _____ PHONE: _____

REQUESTING PERSON'S DEPARTMENT: _____

ADDRESS: _____

FIRE LOCATION: _____ COUNTY OF OCCURENCE: _____
: _____ UCR CODE: _____
: _____ NFIRS CODE: _____

CAUSE OF FIRE: _____

BLDG. DAMAGE ESTIMATE: _____ CONTENTS DAMAGE ESTIMATE: _____

NOTE-This document should not be copied without written permission of the
Investigator who signed the report.

FRISK PROGRAM

CASE NUMBER: _____

Page 2 of 5

INCIDENT DISCOVERED BY: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

INCIDENT REPORTED BY: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

WEATHER APPROXIMATE TEMP.: _____

WIND (Out of): _____

Speed (if known): _____

LIGHTNING?: _____

OTHER: _____

FATALITIES?: _____

NAME: _____

DOB: _____

SSN: _____

NAME: _____

DOB: _____

SSN: _____

NAME: _____

DOB: _____

SSN: _____

NAME: _____

DOB: _____

SSN: _____

NAME: _____

DOB: _____

SSN: _____

INJURIES?: _____

C=Civilian F=Firefighter P=Police Officer

NAME: _____

STATUS-C/F/P: _____

DESCR.: _____

NAME: _____

STATUS-C/F/P: _____

DESCR.: _____

NAME: _____

STATUS-C/F/P: _____

DESCR.: _____

DATE OF INVESTIGATION: _____

TIME ARRIVED: _____

TIME LEFT: _____

AUTHORITY FOR SCENE EXAMINATION: _____

TYPE/CONSTRUCTION OF BUILDING: _____

BUILDING FACED: _____

FD METHOD OF ENTRY (open, forced, shut/unlocked): _____

FORCIBLE ENTRY ANY OTHER THAN FD (Y/N)?: _____

ANY SIGNS OF EXPLOSION (Y/N)?: _____

Describe any other significant observations made outside the structure in the summary.

UTILITIES ELECTRICAL SERVICE ENTRANCE: _____

ON (Y/N)?: _____

FUEL OIL SUPPLY ENTRANCE: _____

ON (Y/N)?: _____

LP GAS SUPPLY ENTRANCE: _____

ON (Y/N)?: _____

NATURAL GAS SUPPLY ENTRANCE: _____

ON (Y/N)?: _____

Any problems found with the above items should be noted in the summary.

PANEL BOX LOCATION: _____

TYPE: _____

ANY TRIPPED?: _____

LOCATION: _____

ELIMINATED?: _____

HOW?: _____

FURNACE LOCATION: _____

TYPE: _____

ELIMINATED?: _____

HOW?: _____

COOLING PLANT LOCATION: _____

TYPE: _____

ELIMINATED?: _____

HOW?: _____

WATER HEATER LOCATION: _____

TYPE: _____

ELIMINATED?: _____

HOW?: _____

ANY OTHER RELEVANT HEATING OR ELECTRICAL EQUIP. LOCATION: _____

ELIMINATED?: _____

HOW?: _____

Any problems found with the above items should be noted in the summary.

FRISK PROGRAM

CASE NUMBER: _____

Page 3 of 5

FIRE DETECTION & PROTECTION SYSTEMS _____ SMOKE ALARMS: _____ SPRINKLERS: _____
HEAT DETECTORS: _____ STANDPIPES: _____ FIRE EXTING.: _____ SECURITY SERVICE: _____
AUTOMATIC FIRE ALARM SYSTEM: _____ OTHER: _____

WHERE DID YOU FIRST ENTER THE STRUCTURE: _____

OBSERVATIONS: _____

ROOMS WITH NO FIRE DAMAGE: _____

ROOMS OF FIRE EXTENSION FROM AREA OF ORIGIN: _____

AREA OF ORIGIN

LOCATION: _____

TYPE OF WALL COVERING: _____

TYPE OF CEILING: _____

DESCRIPTION OF FLOOR: _____

(For explanation of findings see Page Four of this report.).

PERSONNEL ASSISTING THE FIRE SCENE EXAMINATION

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

LOCAL INVESTIGATORS ASSIGNED

NAME: _____ DEPARTMENT: _____ CASE: _____

TELEPHONE: _____

NAME: _____ DEPARTMENT: _____ CASE: _____

TELEPHONE: _____

OTHER OUTSIDE AGENCY: _____ OFFICER: _____

TELEPHONE: _____

CORONER: _____ TELEPHONE NUMBER: _____

DEPUTY STATE FIRE MARSHAL'S ASSISTING

NAME: _____ NAME: _____

NAME: _____ NAME: _____

STILL PHOTOGRAPHS TAKEN BY

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

VIDEO TAKEN BY

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

POSSIBLE MOTIVE: _____

EXPLANATION: _____

FRISK PROGRAM

CASE NUMBER: _____

Page 5 of 5

Put Adult Suspects/Arrests only, JUVENILES entered on supplementary page only

ARRESTED: _____	SUSPECT: _____	ADDRESS	AGE	RACE	S
:	:	:	:	:	:
:	:	:	:	:	:
:	:	:	:	:	:
:	:	:	:	:	:
:	:	:	:	:	:

APPREHENSIONS: _____ FINGERPRINTS: _____

VEHICLE INVOLVED: _____
 (Color, Year, Make, Model, Auto License No.-Year, State)

EVIDENCE/ARTICLES TAKEN

1: _____	DATE: _____
2: _____	DATE: _____
3: _____	DATE: _____
4: _____	DATE: _____
5: _____	DATE: _____
6: _____	DATE: _____
7: _____	DATE: _____
8: _____	DATE: _____
9: _____	DATE: _____
10: _____	DATE: _____

TAKEN BY: _____ DEPARTMENT: _____

SIGNATURE OF INVESTIGATOR _____
 DATE: _____

COPY GIVEN TO: _____ DEPARTMENT: _____
 DATE: _____
 COPY GIVEN TO: _____ DEPARTMENT: _____
 DATE: _____

NOTICE!!!

A COPY OF THIS REPORT IS BEING GIVEN TO YOU AS A COURTESY OUR FIRE DEPARTMENT. THE INFORMATION CONTAINED IN THIS REPORT IS STRICTLY CONFIDENTIAL. PLEASE DIRECT ALL INQUIRIES TO THE INVESTIGATOR OF OUR DEPARTMENT WHO SIGNED THIS REPORT.

THIS REPORT IS NOT TO BE COPIED WITHOUT THE WRITTEN PERMISSION OF THE INVESTIGATOR WHO SIGNED THIS REPORT.

THANK YOU FOR YOUR COOPERATION

NOTES: _____



Attention All Fire Investigators

Investigation
Division

From Chief Investigator Bob Dean

Evidence Packing and Sealing

Our office utilizes Indiana State Police Lab in Indianapolis to analyze samples taken to be tested for hydrocarbons. This of course is not the only type of examination the lab is capable of checking. Other examinations include handwriting analysis, tool mark analysis, fingerprint analysis, plus much more.

The most commonly used lab analysis is the test for hydrocarbons. The lab has asked us to remind you that samples taken for testing should be in a sealed unlined metal can. This is the best container for samples that you want tested for hydrocarbons. They are being very critical of samples that are delivered in glass jars. The reason they are is because the glass could get broken in their evidence lock up. This would increase the risk of contamination and destroying any chance of tests that need to be conducted. Samples should not be collected in plastic bags. The plastic allows the vapors to escape.

When sealing you can use evidence tape or packaging tape (mylar, reinforced, or furnace tape). The lab asks you to not use masking tape, staples, twist ties, or ziplock bags that are not taped or heat sealed. Start the tape on the can's side, go over the top and over to the other side. Put your initials at each end of the tape. The initials should overlap the tape and the can. Remember, when it comes to marking your seals, more is better. The can should then be marked with Item#, Case#, Department Name, Date/Time taken, and a brief description of contents. The item numbers should be numeric. Alpha characters should be used only as a means for marking sub items.

If you are collecting liquid accelerant residue for analysis, you only need about two-three droppers full. IT DOESN'T TAKE VERY MUCH! Place the liquid in a small glass vile. Tighten the cap then tape around the lid to help prevent the liquid from coming out. Place the glass vile into a plastic bag. (This is about the only time you will use the bag in this situation!) Seal the bag by tape at the opening. Place your initials so they overlap the bag and the tape. Put the information discussed prior on the plastic bag.

Other evidence collected to be offered as proof can be secured in paper sacks, boxes, manila envelopes, etc.. Larger items can be tagged by a tag with a wire twist. Again, remember to overlap your initials and put the relevant information on the package.

The admissibility of evidence in a trial greatly depends on proper packaging, continuity of the evidence, and being stored in a secure place. By taking these few steps, you should be successful when evidence is admitted in a trial! Good Luck and call if you have any questions.

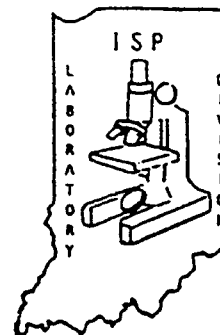
Bob Dean, CFI
Chief Investigator
Investigation Division



Indiana State Police

PHYSICAL EVIDENCE BULLETIN

Laboratory Division



COLLECTION OF VOLATILE FLAMMABLES

INTRODUCTION : Combustion requires three elements - heat, oxygen, and fuel. Fire will be extinguished when any one of these three elements is absent. Fire does not burn solids nor liquids (in general), but the gases formed above them. Heat acts to vaporize the liquid or solid, converting it to a gas which then combines with oxygen to "burn" above the liquid pool. Thus, when flammable liquids soak into material or run into "cracks" there will be insufficient oxygen to support combustion. In these cases residue of flammable substances can be collected.

A. THE SCENE

1. An arsonist will often pour the volatile flammable in more than one place to be certain that "everything will go." Multiple points of origin are typical.
2. An arsonist will generally use more than enough liquid accelerant to be sure he has plenty. This means that frequently some will remain for the careful investigator.

B. LOCATING THE EVIDENCE

1. Points of origin of a fire should be located by an experienced arson investigator combining the use of apparatus (combustible vapor detector) and personal observation (appearances and odor). Specialized experience and training are invaluable in determining a correct cause. For example: arsonists have been known to pour a volatile liquid around each electric outlet to make the fire appear as though it was of electrical origin.
2. Newspapers, furniture, carpet, and padding, or piled trash may serve to protect an accelerant liquid from heat that would otherwise have vaporized and burned away.
3. Remember that if a liquid is poured on a dry surface it will act like water in the sense that it will wet, run, spill, leak, drip, pool, or spread. To some extent it will be absorbed by porous materials.
4. It will flow downward into and along cracks and through holes. It may then be protected by cracks and seams of the flooring, the soil, or whatever surface there is below the floor.
5. A liquid will protect the surface carrying it until the liquid is vaporized away, causing charring. The unburned areas around and beneath the char may very well still contain the suspected liquid which can often be verified by analysis.

C. COLLECTING THE EVIDENCE

1. After a suspected area is discovered, first document it with proper photographs, sketches, and notes.
2. Within reason, collect as much of the suspected material as possible, and place in a sealed container. A clean non-oiled one-gallon or quart wide-mouthed paint can is usually sufficient. Do not use a container which has been used previously to hold any volatile flammable, solvent or oil. Do not use plastic bottles or bags; they are porous to volatile flammables.
3. Liquid samples, thought to be accelerants, should be brought to the lab in clear glass bottles or jars. Only a small amount is needed (1 ounce).
4. Collect in different areas from each set, placing each sample in a separate labeled container.

Do not overlook other types of physical evidence material to the case; e.g., broken glass, toolmarks, etc.

D. COMPARISON STANDARDS

1. Always attempt to obtain samples (comparison standards) of any liquids that could possibly have been used as the volatile flammable accelerant. Also obtain comparison standards (controls) of other unburned "fuels" such as carpets, drapes, upholstery, etc., as they may contribute to the residues detected.
2. Place each comparison standard in a separate sealed air-tight metal container. Always label each comparison standard as carefully and completely as any other evidence material (see above).
3. Always transport in such a way that there can be no question regarding the possible accidental contamination of any of the questioned sample above. A narrative report describing the fire scene, its suppression and follow-up investigation should be included when available.

E. RESULTS

1. The laboratory will identify volatile flammables present. This identification may not be specific, due to changes undergone by the liquid during or after the fire. In cases of unusual or extensively burned accelerants, the lack of a comparison standard can make identification difficult.
2. The flammable accelerant or lab standard can be identified as consistent in origin with a submitted control. However, when unusual or high level of contaminants are present in conjunction with low accelerant levels, accelerant identification may not be possible.

Local agencies may wish to consult with the Indiana State Fire Marshal for assistance. For further information you may wish to consult with your local District I.S.P. Technician or the State Police Laboratory in Indianapolis.

PROPERTY RECORD AND RECEIPT

CASE #

DETAILS

[illegible]

FRISK PROGRAM

Page 1 of 2

FIRE DEPARTMENT
INVESTIGATION DIVISION

REPORT OF VEHICLE FIRE INVESTIGATION

CASE NUMBER: _____ DATE ASSIGNED: _____ INVESTIGATOR: _____
DATE INVESTIGATION BEGAN: _____OWNER'S NAME: _____
OWNER'S ADDRESS: _____
CITY, STATE, ZIP: _____ TELEPHONE NUMBER: _____
INSURANCE CO.: _____
AGENT: _____ TELEPHONE NUMBER: _____
ADJUSTER: _____ TELEPHONE NUMBER: _____
POLICY NUMBER: _____ CLAIM NUMBER: _____
COVERAGE: _____
FINANCE CO.: _____ TELEPHONE NUMBER: _____
MONTHLY PAYMENT: _____ BALANCE DUE: _____DRIVER'S NAME: _____
DRIVER'S ADDRESS: _____
CITY, STATE, ZIP: _____ TELEPHONE NUMBER: _____
INSURANCE COMPANY: _____
AGENT: _____ TELEPHONE NUMBER: _____DATE OF FIRE: _____ DAY: _____ TIME: _____ hrs FD ARRIVAL TIME: _____ hrs
DID FD RESPOND?: _____ NAME: _____
O.I.C.: _____ TELEPHONE NUMBER: _____FIRE LOCATION: _____
COUNTY OF OCCURENCE: _____REQUEST MADE BY: _____ TELEPHONE NUMBER: _____
REQUESTING PERSON'S DEPARTMENT: _____FIRE DISCOVERED BY: _____
ADDRESS: _____
CITY, STATE, ZIP: _____ TELEPHONE NUMBER: _____2 DIGIT VEHICLE CODE: _____ MAKE: _____ STYLE: _____ MODEL: _____ COLOR: _____
YEAR: _____ LICENSE NUMBER: _____ VIN: _____ TYPE: _____CAUSE OF FIRE: _____ POSSIBLE MOTIVE: _____
ESTIMATED VEHICLE DAMAGE: _____
ESTIMATED CONTENTS DAMAGE: _____DATE OF INVESTIGATION: _____
TIME ARRIVED: _____ TIME LEFT: _____
AUTHORITY FOR SCENE EXAMINATION: _____BATTERY: _____ BREATHING: _____ FUEL LINE CONNECTED: _____ HOSES OR LINES CONNECTED: _____
VALVE COVER SECURE: _____ OTHER: _____
FRESH BODY DAMAGE: _____ UNDERCARRIAGE DAMAGE: _____ "PUSH" MARKS ON BUMPER: _____
GAS CAP SECURE: _____ OTHER: _____
DO TIRES MATCH: _____ IF NO, EXPLAIN: _____
LUG NUTS INTACT: _____ DO RIMS MATCH: _____ TIRES WORN: _____
SEATS IN PLACE: _____ RADIO IN PLACE: _____ KEY IN IGNITION: _____ DOORS LOCKED: _____
WINDOW POSITIONS U-UP D-DOWN
LEFT FRONT: _____ LEFT REAR: _____ RIGHT FRONT: _____ RIGHT REAR: _____ OTHER: _____

Page 2 of 2

REPORT OF VEHICLE FIRE INVESTIGATION

CASE NUMBER: _____

EXAMINATION OF VEHICLE SHOWS:

ARTICLES FOUND INSIDE:

SPARE TIRE: _____ TIRE JACK: _____ TOOLS: _____ CONTENTS IN TRUNK: _____

INJURIES: _____ FATALITIES: _____

STILL PHOTOGRAPHS TAKEN BY

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____
NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

VIDEO TAKEN BY

NAME: _____ DEPARTMENT: _____

NAME: _____ DEPARTMENT: _____

SIGNATURE OF INVESTIGATOR

DATE: _____

A COPY OF THIS REPORT IS BEING GIVEN TO YOU AS A COURTESY OF OUR FIRE DEPARTMENT. THE INFORMATION CONTAINED IN THIS REPORT IS STRICTLY CONFIDENTIAL PLEASE DIRECT ALL INQUIRIES TO THE INVESTIGATOR OF OUR DEPARTMENT WHO SIGNED THIS REPORT.

THIS REPORT IS NOT TO BE COPIED WITHOUT THE WRITTEN PERMISSION OF THE INVESTIGATOR WHO SIGNED THIS REPORT.

THANK YOU FOR YOUR COOPERATION.

COPY GIVEN TO: _____ **DEPARTMENT:** _____

DATE: _____

COPY GIVEN TO: **DEPARTMENT:**

DATE: _____

Owner/Occupant Fire Investigation Questionnaire

1. Name _____
2. Date of Birth _____
3. Social Security Number _____
4. Home Address _____

5. Home Telephone _____ 6. Work Telephone _____
7. Telephone Number where staying _____
8. Automobiles:
 - a) Make _____
 - b) Year _____
 - c) Color _____
 - d) License Number _____
9. Learned of Fire:
 - a) Time _____
 - b) How _____
 - c) Where were you (alibi) _____
10. Last in Premises:
 - a) Time _____
 - b) Day _____
 - c) Routine of Business _____

11. Anyone with person at that time? _____

12. Did person check and lock doors and windows? _____

FRISK PROGRAM

Page 2

13. Did person set a burglar alarm? _____
14. Anyone remain on the premises? _____
- a) Who? _____
- b) Why? _____
- _____
15. Where did person go after leaving building? _____
- _____
- a) Time left _____
- b) Time arrived _____
16. Prior to leaving, did person turn off lights and appliances? _____
- a) How? _____
- b) Any appliances left on? _____
- c) Why? _____
- d) Location? _____
17. Any difficulties with:
- a) Electric Wiring? (If so, where) _____
- b) Appliances? _____
- c) Machinery? _____
- d) Potential sources of heat energy? _____
- _____
- _____
- _____
18. How many sets of keys? _____
19. Who has other keys? _____
- a) Name _____
- b) Address _____
- c) Relationship (if any) _____
- _____

20. Alarm Sy: Alarm System:

- a)Manuf a)Manufacturer? _____
b)Type b)Type of alarm? _____
c)When c)When installed? _____
d)Maintained by whom? _____
e)Any prior burglaries? _____

21. Any opinion as to the cause of the fire? _____

22. Experienced any other fire losses? _____

23. Unusual activity before fire? _____

24. Any arrests and/or convictions? _____

25. Insurance policies:
- a)Agent _____
- b)Insurance Company(s) _____
- c)Description of policies
- 1.Type and number _____
2. Amount of coverage _____
- d)Any recent change in amount of coverage? _____
- 1.Why? _____

26. Mortgage Companies?

a)Who and amount with each _____

FRISK PROGRAM

Page 4

27. Have you ever filed or are you in the process of filing bankruptcy?

a) When _____

b) What kind? _____

28. Description of contents of building:

a) Location of flammables? _____

b) Description and location of appliances? _____

c) Any other known fire hazards? _____

d) Any alterations done to structure? _____

29. Any other information to assist in the investigation? _____

30. Did you set the fire? _____

INDIANA STATE FIRE MARSHAL'S OFFICE
INVESTIGATION DIVISION

CASE # _____ DATE _____

FIREMAN/POLICE OFFICER OBSERVATION REPORT:

- A. NAME _____ DEPARTMENT _____
RES. TX _____ DEPT. TX _____
- B. I have been a _____ for _____ year
- C. My present rank is _____
- D. If you are a fireman, what certification level are you with the State Fire Marshal's Office? _____
- E. Have you had any other specialized training in fire fighting or fire investigation? _____. If yes, explain. _____
- F. Were any other firemen or police officers on the scene when you arrived? ____
- G. If you are a police officer, what specialized training have you had? _____
- H. I arrived at the scene from the: North _____ East _____ South _____ West _____
- I. When you arrived, what color was the smoke? _____
- J. From which side of the structure was the most amount of smoke coming?
North _____ East _____ South _____ West _____ Roof _____.
- K. Did you see any flames? _____. If yes, what color were the flames?
- | | | | |
|-------------------------------|---------|--------------------|---------|
| _____ Faint red | - 900°F | _____ Salmon red | -1650°F |
| _____ Red-visible in daylight | - 975°F | _____ Orange | -1725°F |
| _____ Blood Red | -1050°F | _____ Lemon | -1825°F |
| _____ Dark Cherry Red | -1175°F | _____ Light Yellow | -1975°F |
| _____ Medium Cherry Red | -1250°F | _____ White | -2200°F |
| _____ Cherry Red | -1365°F | _____ Blue White | -2550°F |
| _____ Bright Red | -1550°F | | |
- L. Where was the lowest point of burning that you saw? _____
- M. In what part of the structure was the greatest amount of fire? _____
- N. Did you check any doors? _____. If yes, which ones, and were they locked or unlocked, open or closed? _____
- O. Were any windows already broken out? _____ If yes, which ones? _____
- P. Did you smell anything unusual? _____ If yes, describe the odor. _____
- Q. Were any areas more difficult to put out than others? _____. If yes, where were they? _____

